



**RSAF
SPECIAL PROJECTS
QUESTIONNAIRE**

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APPLICANT INFORMATION

AGENCY NAME: _____ DATE: _____

RSAF GRANT # _____ PROJECT TITLE: _____

REGIONAL COUNCIL SUBMITTING QUESTIONNAIRE: _____

1. PLEASE GIVE A BRIEF DESCRIPTION OF THE SPECIAL PROJECT (2-3 SENTENCES).

2. WHAT ARE THE SPECIFIC OBJECTIVES OF THE PROJECT AND ANTICIPATED TIME FRAMES?

3. EXPLAIN ANTICIPATED IMPACT OF THE PROJECT ON AGENCY, CUSTOMER SERVICE, OR COMMUNITY. WHO WILL BENEFIT FROM THE PROJECT?

4. WHAT DO YOU EXPECT WILL BE THE TWO MOST CRITICAL ISSUES OR CHALLENGES FACING YOUR AGENCY IN COMPLETING THIS SPECIAL PROJECT?

5. DOES YOUR AGENCY HAVE ADEQUATE RESOURCES (money, equipment, facilities, personnel, etc.) TO ACHIEVE THE GOALS OF THE PROJECT?

6. DESCRIBE HOW YOU WILL EVALUATE WHAT CHANGES OR POSITIVE PROGRESS CAN BE DIRECTLY LINKED TO THE SPECIAL PROJECT.

RETURN COMPLETED QUESTIONNAIRES TO CAROL MORROW, GRANTS ADMINISTRATOR